



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1965

<b>SERIAL NUMBER</b> 09/938,406	<b>FILING OR 371(c) DATE</b> 08/21/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 484112.408D1
<b>APPLICANTS</b> George H. Lowell, Baltimore, MD; Thomas C. Vancott, Brookesville, MD; Deborah L. Birx, Rockville, MD;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/214,701 09/30/1999 * which is a 371 of PCT/US97/12253 07/10/1997 and claims benefit of PCT/US97/12253 07/10/1997 (*Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/10/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 18
Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 00500				
<b>TITLE</b> Protein and peptide vaccines for inducing mucosal immunity				
<b>FILING FEE RECEIVED</b> 1220	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	